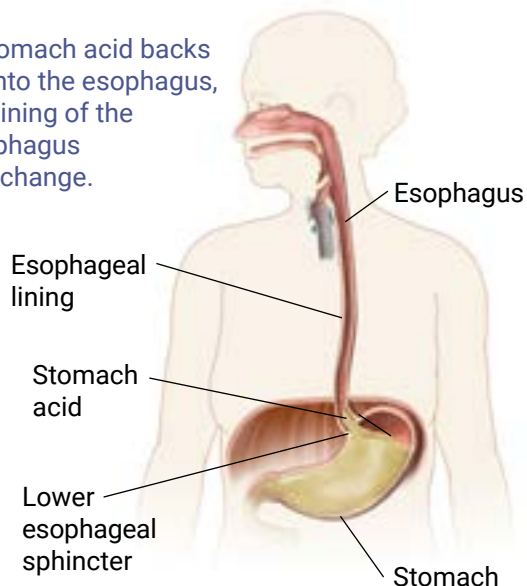


## Understanding GERD

When you eat, food travels from the mouth to the stomach through the esophagus. At the base of the esophagus is a ring of muscle called the **lower esophageal sphincter (LES)**. The LES acts like a 1-way door, allowing food to pass to the stomach. Acids in the stomach then help break down and digest the food. If the LES is weakened, stomach acid may flow back upward into the esophagus. This is GERD.

If stomach acid backs up into the esophagus, the lining of the esophagus can change.



## How Barrett's develops

The stomach is protected from its own acid by a special lining. Stomach acid normally stays out of the esophagus. If acid repeatedly backs up into the esophagus with GERD, however, this can damage the esophagus. In some people, changes may then occur in the lining of the esophagus. This is Barrett's esophagus. The changed lining is not normal. If the lining continues to change, it may be more likely to become cancerous.

## Living with Barrett's

Stay in touch with your provider and keep your appointments. Get checkups as often as your provider suggests. This may include an endoscopy every 3 to 5 years. Regular exams help catch any signs of abnormal tissue in the esophagus early, when it's easier to treat.



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# Barrett's Esophagus

A problem caused by GERD

## What is Barrett's esophagus?

The **esophagus** is the tube that carries food from the mouth to the stomach. With Barrett's esophagus, part of the lining of the esophagus near the stomach has changed. The changed lining is not cancer. But there is a small risk that it could become cancer later on. This brochure tells you more about Barrett's esophagus and how it can be managed.

## Causes of Barrett's esophagus

Barrett's esophagus usually develops as a result of gastroesophageal reflux disease (**GERD**). GERD is the flow of acid from the stomach back up into the esophagus. Other factors that can increase the risk for Barrett's esophagus include being assigned male at birth, Caucasian, or older than age 50. Being overweight or a smoker or having a hiatal hernia also increases your risk.



With Barrett's esophagus, you may have symptoms of GERD such as heartburn.

## Symptoms you may have

Barrett's esophagus does not cause symptoms, but most people with the condition do have symptoms of GERD. These can include:

- Burning pain in the chest (heartburn)
- Sour-tasting fluid backing up into the throat
- Frequent burping

The symptoms may get worse after eating and when lying down.

## Diagnosing Barrett's esophagus

Barrett's esophagus is most often found during testing for other digestive problems. Your provider may also recommend that you be tested for Barrett's if you've had GERD for more than 5 years and other risk factors. The best way to do this is with a procedure called **endoscopy**.



Endoscopy gives your provider a direct view of your esophagus.

## Endoscopy

During endoscopy, a long, thin tube called an endoscope (**scope**) is used to examine the lining of the esophagus. You'll be given medicine to make you relaxed and drowsy. Medicine may also be used to numb your throat. The scope is then placed through your mouth and into your esophagus. Then it's moved to the lower part of your esophagus, where Barrett's is usually found. The scope sends live video of the inside of the esophagus to a monitor. This allows the provider to check the esophagus for problems. Some tiny samples of tissue may be taken. These can be examined later for signs of Barrett's. Your provider will give you instructions on how to prepare for an endoscopy. Be sure to follow them carefully.

## Preventing further damage

To keep track of the changes in your esophagus, your provider may suggest regular tests. They may also suggest ways for you to control GERD. This may help keep Barrett's from getting worse.

## Lifestyle changes

Some changes in your lifestyle can help control GERD symptoms. You may be advised to:

- Lose weight
- Quit smoking
- Don't eat certain foods and drinks if they make GERD worse. These can include chocolate, coffee, tea, alcohol, fatty foods, and citrus- or tomato-based foods.
- Raise the head of your bed on 6- to 8-inch blocks. This may help prevent reflux at night.

## Medicines

Your provider may recommend medicines to help control GERD. These work by reducing the amount of acid in the stomach. They may be available over the counter or by prescription. If medicines are part of your treatment plan, be sure to take them as directed.

## Other treatments

In some cases, other treatments may be needed. These include surgery to treat severe reflux or procedures to remove or destroy abnormal tissue in the esophagus. Your provider can give you more information about these treatments, if needed.